

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

10728041

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		4				
22		4				
23		4				
24		3				
25		3				
26		3				
27		3				
28		3				
29		1				
30		3				
31		3				
32		4				
33		3				
34		3				
35		4				
36	1					
37		1				
38		1				
39		1				
40		2				
41		2				
42		2				
43		2				
44		2				
45		2				
46		2				
47		2				
48		1				
49		1				
50		1				
TOTAL IND.	2					
TOTAL DEP.	101					
TOTAL CLAIMS	103					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51		1				
52		2				
53		2				
54		1				
55		1				
56		1				
57		1				
58		3				
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						